

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/625,331
Filing Date	07/23/2003
First Named Inventor	Derald Christians
Art Unit	3673
Examiner Name	Michael Safavi
Attorney Docket Number	1950

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> IDS Transmittal Letter; Cited References; Check in the amount of \$180.00; and Return Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<input type="checkbox"/> Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	BECK & TYSVER, P.L.L.C.		
Signature			
Printed name	Stephanie J. James		
Date	3/7/05	Reg. No.	34,437

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Mary S. Keller	Date	3-7-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.

Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\\$) 180.00
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**Complete if Known**

Application Number	10/625,331
Filing Date	07/23/2003
First Named Inventor	Derald Christians
Examiner Name	Michael Safavi
Art Unit	3673
Attorney Docket No.	1950

**METHOD OF PAYMENT** (check all that apply)
 Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

 Deposit Account Deposit Account Number: 500246 Deposit Account Name: Beck & Tysver, P.L.L.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

**Small Entity****Fee (\$)**

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=	

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

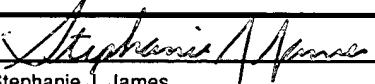
**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

**Fees Paid (\$)**Other (e.g., late filing surcharge): Information Disclosure Statement

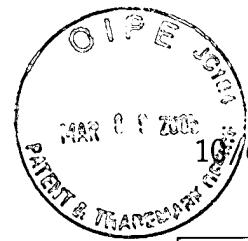
180.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 34,437	Telephone 612-915-9633
Name (Print/Type)	Stephanie J. James		Date

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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10/625,331

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Derald Christians et. al	Examiner:	Michael Safavi
Serial No.:	10/625,331	Group Art Unit:	3673
Filing Date:	July 23, 2003	Docket No.:	1950
Title	<b>Soil Stabilization and Pile Formation Method</b>		

Date of Deposit: 3-7-05

I hereby certify that this paper is being deposited in the United States Postal Service, as first class mail, in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450

Signature: Mary S. Keller  
Printed Name: Mary S. Keller

**Transmittal of  
Information Disclosure Statement  
37 C.F.R. §1.97(c)**

Assistant Commissioner for Patents  
Washington, DC 20231

With regard to the above-identified application, the items of information listed on the enclosed Information Disclosure Statement are brought to the attention of the Examiner under the terms of 37 C.F.R. §1.97(c). This statement should be considered because it is submitted after the mailing date of a first Office Action on-the-merits, but before the mailing date of a final action under 37 C.F.R. § 1.113, and before the mailing date of the Notice of Allowance under 37 C.F.R. § 1.311.

Enclosed is a check in the amount of \$180 under 37 C.F.R. § 1.17(p) for consideration of the items listed on the enclosed Form 1449.

In accordance with 37 C.F.R. §1.98(a)(2), a copy of each document or other information listed on the enclosed.

No representation is made that a reference is "prior art" within the meaning of 35 U.S.C. §§ 102 and 103. Moreover, Applicants do not represent that a reference has been

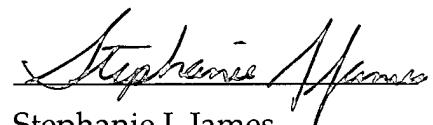
thoroughly reviewed or that any relevance of any portion of a reference is intended. The Applicant reserves the right, pursuant to 37 C.F.R. § 1.131 or otherwise, to establish either point to the contrary.

Consideration of the items listed is respectfully requested. Pursuant to the provisions of M.P.E.P. 609, it is requested that the Examiner return a copy of the attached Information Disclosure Statement, marked as being considered and initialed by the Examiner, to the undersigned with the next official communication.

Please charge any additional fees or credit any overpayment to Deposit Account No. 500246.

Respectfully submitted,  
DDC CONTRACTING, INC.  
By his/her attorneys:

Date: 3/7/05

  
Stephanie J. James  
Registration No. 34,437  
Beck & Tysver, P.L.L.C.  
2900 Thomas Ave., #100  
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**Complete if Known**

Substitute for form 1449/PTO

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet

1

of 1

Application Number	10/625,331
Filing Date	07/23/2003
First Named Inventor	Derald Christians
Art Unit	3673
Examiner Name	Michael Safavi
Attorney Docket Number	1950

**U. S. PATENT DOCUMENTS**

Examiner Initials*	Cite No. <sup>1</sup>	Document Number <small>Number-Kind Code<sup>2</sup> (if known)</small>	Publication Date <small>MM-DD-YYYY</small>	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		US- 3,512,365	05/19/1970	Muller	
		US- 4,605,339	08/12/1986	Bullivant	
		US- 3,851,485	12/03/1974	Steding	
		US- 2,923,133	02/02/1960	Muller	
		US- 2,673,453	03/30/1954	Templeton	
		US- 4,618,289	10/21/1986	Federer	
		US- 3,852,971	12/10/1974	Phares	
		US- 3,925,998	12/16/1975	LeCorgne	
		US- 4,012,915	03/22/1977	Poma	
		US- 4,293,242	10/06/1981	Merjan	
		US- 5,980,446	11/09/1999	Loomis et al.	
		US- 4,397,588	08/09/1983	Goughnour	
		US-			

**FOREIGN PATENT DOCUMENTS**

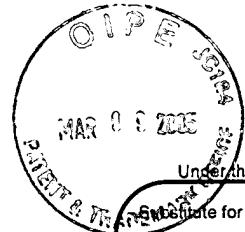
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document <small>Country Code<sup>3</sup>-Number<sup>4</sup>-Kind Code<sup>5</sup> (if known)</small>	Publication Date <small>MM-DD-YYYY</small>	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T <sup>6</sup>

Examiner Signature	Date Considered
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

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PTO/SB/08B (08-03)

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## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

*(Use as many sheets as necessary)*

INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				<b>Complete if Known</b>	
				<b>Application Number</b>	10/625,331
				<b>Filing Date</b>	07/23/2003
				<b>First Named Inventor</b>	Derald Christians
				<b>Art Unit</b>	3673
				<b>Examiner Name</b>	Michael Safavi
Sheet	1	of	1	<b>Attorney Docket Number</b>	1950

## NON-PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

**1** Applicant's unique citation designation number (optional). **2** Applicant is to place a check mark here if English language Translation is attached.

Applicant's unique claim designation number (optional).  Applicant is to place a check mark here if English language translation is attached.  
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**Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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